

Volunteer Application

							Date:	
Name :								
(Last)			(First)					
Address:			-					
(Street)		(City	<i>γ</i>)		(State)	(Zip)	
Day Phone:								
()		()		Cla		xp. Date		
Are you under age	18? _	YES		NO	<u> </u>		-	
Please answer the folthe right. 1. Do you have a disal perform the job for 2. Have you, as an adthe law, excluding answer will not aut. 3. Have you ever beer 4. Have you ever work EDUCATION: Check Certificate of Training	cility which which you ult, been cominor trafficomatically a discharge ted for the	may limit y have appli onvicted of c violations disqualify y ed from a p City of Mes	your ability ed? a violation of the control of the	YES to of leted: 1 2 3	NO			
Are you presently em Employed full- Full-time stude	time	heck those	Emplo) Dyed part-time ime student			Temporarily Looking for	unemployed work
Current Employer Name: Address:						Phone (()	
What type of volunt	eer job a	re you me	ost intere	sted in at pre	esent?			
Day(s) you are ava	ailable:							
Times Available	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Morning 7am/12noon Afternoon 12pm/5pm								
Evening 5pm/12midnight								

10/07

Do you have reliable transportation?



What are your present goals for a volunteer job? (e.g., gain school credit, work experience, etc...)

	nent: (Please circle)		•	Τ.	40 :				Spot	Special
Length o	f assignment desired:	3 months	6 months	6-	12 month	ns	More than	a year	jobs	Projects
	•	VOLUNTEE				KILLS				
		<u> </u>	do these		gs:	1	T			
I have these skills & abilities to offer:				Very Well Well		O.K. at all		Comments		nts
Speak & Persuade: Skill in expressing ideas; ability to										
ofluence oth										
	reative, grants, reports									
	eping & Reporting: Filing, k	ceeping neat ac	ccurate							
records; take minutes										
Using Statistics & Numbers : Ability to collect & analyze figures; compute & estimate										
Artistic Ski	IIs: Draw, paint, photograph	, design								
Skills Ir 	nterest Administrative Receptionist Data Entry	·			Skills	Intere	est Pers Tele Tead	phone cher/Tra	olicitatio Courtes	า
	Administrative Receptionist Data Entry Public Relation Writer(Newslett Sports/Coachin Design/Decora Volunteer recru Letter writing Special Events Fire Computer syste	s/Publicity ter, Manuals ig tion uitment	·		•		Pers Tele Tead Resc Publ Set Pain Culti Mus Surv Mark Word	sonal so phone cher/Tra earch lic Spea up & Cl ting/Dr ural Art eum rey-taki ceting d Proce	olicitation Courtes ainer aking lean up awing awing awing	n y
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	Administrative Receptionist Data Entry Public Relation Writer(Newslett Sports/Coachin Design/Decora Volunteer recru Letter writing Special Events Fire Computer syste Working with: (Seniors Youth	s/Publicity ter, Manuals ig tion uitment ems Check))		•		Pers Tele Tead Resc Publ Set (Pain Cultr Mus Surv Mark Word Fore lang Publ	sonal so phone cher/Tra earch ic Spea up & Cl ting/Dr ural Art eum rey-taki keting d Proce sign Lar uages? ic Spea	olicitation Courtes ainer aking lean up awing s ng essing nguage,	n y
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How did you hear about our volunteer program?



Have you been active as a volunteer with other organization of so, please list with whom, responsibilities and dates:	ations?YESNO						
Would you be willing to be "on-call" for special assignment	ents?YESNO						
EMERGENCY INFO	ORMATION						
Person to contact: Family Physician Are you presently under a physician's care if ye	Phone: Phone:						
Are you presently under a physician's care if ye	es, please specify						
Are you presently taking any medication? if yes, please list them							
Please list any allergies/existing medical conditions: Allergies:							
Existing medical conditions:							
If you are under 18, this must be completed by a par Parent/Guardian Name:	rent or guardian:						
Phone: Day	Eve/Weekend						
I hereby certify that all statements made in this application matters contained in the application. I acknowledge that this application will be cause for refusal of placement period of my placement. I am aware that a background I am aware that fingerprinting will be conducted for all City of Mesquite, their officers, employees, and organizand against and all liability arising out of or in any way the City of Mesquite does not carry a specific insurance	nat any false statements or misrepresentation on t or immediate dismissal at any time during the d investigation may be required before placement. volunteer positions. I agree to hold harmless the cations co-sponsoring programs or activities, from a connected with the volunteer program. I realize						
Signature	Parent/Guardian Signature						
Return Volunteer Application to:	City of Mesquite Personnel Department 10 East Mesquite Blvd Mesquite, NV 89027						